

Fill in this information to identify your case and this filing:

Debtor 1 Tery N. Tittle
First Name Middle Name Last Name

Debtor 2 Kimberly M. Tittle
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number 20-14377-AMC
(if know)

☒ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2
- ☒ Yes. Where is the property?

1.1 324 Anvil Rd.
Street address, if available, or other description

Nottingham PA 19362
City State ZIP Code

Chester County
Country

What is the property? Check all that apply

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other _____

Who has an interest in the property? Check one

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Zero Equity beyond liens and costs of sale (estimated at 2% of sale price).

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

Current value of the entire property?	Current value of the portion you own?
\$ <u>440,000.00</u>	\$ <u>440,000.00</u>

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Tenancy by the Entireties

☐ Check if this is community property

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....>

\$ 440,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
- ☒ Yes

3.1 Make: Chev.
 Model: Impala
 Year: 2015
 Approximate mileage: 75000
 Other information:

Condition: Fair;

Who has an interest in the property? Check one
☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

Current value of the entire property?	Current value of the portion you own?
\$ <u>10,734.00</u>	\$ <u>10,734.00</u>

3.2 Make: Chev.
 Model: Silverado
 Year: 2016
 Approximate mileage: 144000
 Other information:

Condition: Fair;

Who has an interest in the property? Check one
☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

Current value of the entire property?	Current value of the portion you own?
\$ <u>17,687.00</u>	\$ <u>17,687.00</u>

3.3 Make: Honda
 Model: Goldwing
 Year: 2006
 Approximate mileage: 9000
 Other information:

Condition: Fair;

Who has an interest in the property? Check one
☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

Current value of the entire property?	Current value of the portion you own?
\$ <u>6,590.00</u>	\$ <u>6,590.00</u>

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories
Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

☐ No
☒ Yes

4.1 Make: Chevrolet
 Model: Express
 Year: 2002
 Other information:

Condition: Poor; Van;

Who has an interest in the property? Check one
☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

Current value of the entire property?	Current value of the portion you own?
\$ <u>0.00</u>	\$ <u>0.00</u>

4.2 Make: Yamaha
 Model: Motorcycle
 Year: 2009
 Other information:

Condition: Fair;

Who has an interest in the property? Check one
☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

Current value of the entire property?	Current value of the portion you own?
\$ <u>4,000.00</u>	\$ <u>4,000.00</u>

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....>

\$ 39,011.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Debtor 1

Tery N. Tittle & Kimberly M. Tittle
First Name Middle Name Last Name

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6. Household goods and furnishings

Do not deduct secured claims or exemptions.

Examples: Major appliances, furniture, linens, china, kitchenware

- ☐ No
- ☒ Yes. Describe...

Living Room Furniture/Decor
 Family Room Furniture/Decor
 Garage Items/Tools
 Dining Room Furniture
 Master Bedroom Furniture/Decor
 Kitchen Items/Small Appliances
 Grill/Outdoor Furniture
 8' x 10' shed
 12' x 16' shed

\$ 2,600.00**7. Electronics***Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

- ☐ No
- ☒ Yes. Describe...

Laptops, Smartphones (2)
 TV's

\$ 300.00**8. Collectibles of value***Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

- ☐ No
- ☒ Yes. Describe...

Guitar

\$ 500.00**9. Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

- ☐ No
- ☒ Yes. Describe...

Billiards Table and accessories

\$ 500.00**10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment

- ☐ No
- ☒ Yes. Describe...

1 Shotgun, 2 Rifles, 4 Handguns

\$ 1,200.00**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

- ☐ No
- ☒ Yes. Describe...

Clothing

\$ 25.00**12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems gold, silver

- ☐ No
- ☒ Yes. Describe...

Jewelry

\$ 1,000.00**13. Non-farm animals***Examples:* Dogs, cats, birds, horses

- ☒ No
- ☐ Yes. Describe...

14. Any other personal and household items you did not already list, including any health aids you did not list

- ☒ No
☐ Yes. Give specific information...

15. Add the dollar value of the portion you own for all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here.....>

\$6,125.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

- ☒ No
☐ Yes..... Cash \$ _____

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses and other similar institutions. If you have multiple accounts with the same institution, list each.

- ☐ No
☒ Yes..... Institution name:
- | | | |
|-------------------------|-------------------------------|--------------------|
| 17.1. Checking account: | <u>Presence Bank (Tery)</u> | \$ <u>3,600.00</u> |
| 17.2. Checking account: | <u>Sun East FCU (Joint)</u> | \$ <u>0.00</u> |
| 17.3. Checking account: | <u>Citadel F.C.U. (Joint)</u> | \$ <u>0.00</u> |
| 17.4. Checking account: | <u>PNC Bank (Kim)</u> | \$ <u>512.54</u> |
| 17.5. Savings account: | <u>Citadel F.C.U. (Joint)</u> | \$ <u>0.00</u> |
| 17.6. Savings account: | <u>Sun East FCU (Joint)</u> | \$ <u>0.00</u> |

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

- ☒ No
☐ Yes.....

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

- ☒ No
☐ Yes. Give specific information about them.....

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

- ☒ No
☐ Yes. Give specific information about them.....

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

- ☐ No
☒ Yes. List each account separately

Type of account	Institution name	
401(k) or similar plan:	<u>Upper Chesapeake Health System - Vanguard 401k</u>	\$ <u>10,192.65</u>

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

- ☒ No
☐ Yes.....

Debtor 1

Tery N. Tittle & Kimberly M. Tittle
First Name Middle Name Last Name

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23. **Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

- ☒ No
☐ Yes.....

24. **Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

- ☒ No
☐ Yes.....

25. **Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

- ☒ No
☐ Yes. Give specific information about them...

26. **Patents, copyrights, trademarks, trade secrets, and other intellectual property***Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

- ☒ No
☐ Yes. Give specific information about them...

27. **Licenses, franchises, and other general intangibles***Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

- ☒ No
☐ Yes. Give specific information about them...

Money or property owed to you?**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

28. **Tax refunds owed to you**

- ☒ No
☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...

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Federal:	\$ <u>0.00</u>
State:	\$ <u>0.00</u>
Local:	\$ <u>0.00</u>

29. **Family support***Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

- ☒ No
☐ Yes. Give specific information....

30. **Other amounts someone owes you***Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- ☐ No
☒ Yes. Give specific information....

Co-Debtor was injured at work in February 2014. She has an outstanding workers compensation claim for unreimbursed medical expenses and travel expenses in addition to unpaid wages. She expects a lump sum payment of past benefits and reimbursements not already received.

\$ 0.0031. **Interests in insurance policies**

- ☐ No
☒ Yes. Name the insurance company of each policy and list its value....

Company name:

Beneficiary:

Surrender or
refund value:

State Farm Life Ins. (Policy on each Debtor)

Spouse

\$ 0.0032. **Any interest in property that is due you from someone who has died**

- ☒ No
☐ Yes. Give specific information....

33. **Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

- ☒ No
☐ Yes. Give specific information....

Debtor 1

Tery N. Tittle & Kimberly M. Tittle
First Name Middle Name Last Name

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34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims
- ☒ No
☐ Yes. Give specific information....
35. Any financial assets you did not already list
- ☒ No
☐ Yes. Give specific information...
36. Add the dollar value of the portion you own for all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....>

\$14,305.19

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?
- ☒ No. Go to Part 6.
☐ Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?
- ☒ No. Go to Part 7.
☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

- ☐ No
☒ Yes. Give specific information...

8X10 Shed, 12X16 Shed

54. Add the dollar value of all of your entries from Part 7. Write that number here>

\$0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2.....>		\$440,000.00
56. Part 2: Total vehicles, line 5	\$ 39,011.00	
57. Part 3: Total personal and household items, line 15	\$ 6,125.00	
58. Part 4: Total financial assets, line 36	\$ 14,305.19	
59. Part 5: Total business-related property, line 45	\$ 0.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$ 0.00	
61. Part 7: Total other property not listed, line 54	+ \$ 0.00	
62. Total personal property. Add lines 56 through 61	\$ 59,441.19	Copy personal property total▶
63. Total of all property on Schedule A/B. Add line 55 + line 62		+ \$ 59,441.19
		\$ 499,441.19

Fill in this information to identify your case:

Debtor 1	Tery N. Tittle		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Kimberly M. Tittle		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Eastern District of Pennsylvania			
Case number (if known)	20-14377-AMC		

☒ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt**1. Which set of exemptions are you claiming?** Check one only, even if your spouse is filing with you.

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
☒ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description: 324 Anvil Rd.	\$ 440,000.00	<input checked="" type="checkbox"/> \$ 15,429.34 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(1)
Line from Schedule A/B: 1.1 Household Goods - Living Room Furniture/Decor	\$ 500.00	<input checked="" type="checkbox"/> \$ 500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Line from Schedule A/B: 6 Household Goods - Family Room Furniture/Decor	\$ 700.00	<input checked="" type="checkbox"/> \$ 700.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Line from Schedule A/B: 6			

3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
☐ No
☐ Yes

Debtor

Tery N. Tittle & Kimberly M. Drapeau
First Name Middle Name Last Name

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Case number (if known) 20-14377-AMC

Part 2: Additional Page

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Household Goods - Garage Items/Tools Brief description: Line from <i>Schedule A/B</i> : 6	\$200.00	<input checked="" type="checkbox"/> \$ 200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Household Goods - Dining Room Furniture Brief description: Line from <i>Schedule A/B</i> : 6	\$500.00	<input checked="" type="checkbox"/> \$ 500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Household Goods - Master Bedroom Furniture/Decor Brief description: Line from <i>Schedule A/B</i> : 6	\$200.00	<input checked="" type="checkbox"/> \$ 200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Household Goods - Kitchen Items/Small Appliances Brief description: Line from <i>Schedule A/B</i> : 6	\$300.00	<input checked="" type="checkbox"/> \$ 300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Household Goods - Grill/Outdoor Furniture Brief description: Line from <i>Schedule A/B</i> : 6	\$200.00	<input checked="" type="checkbox"/> \$ 200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Household Goods - 8' x 10' shed Brief description: Line from <i>Schedule A/B</i> : 6	\$0.00	<input checked="" type="checkbox"/> \$ 1.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Household Goods - 12' x 16' shed Brief description: Line from <i>Schedule A/B</i> : 6	\$0.00	<input checked="" type="checkbox"/> \$ 1.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Electronics - Laptops, Smartphones (2) Brief description: Line from <i>Schedule A/B</i> : 7	\$100.00	<input checked="" type="checkbox"/> \$ 100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Electronics - TV's Brief description: Line from <i>Schedule A/B</i> : 7	\$200.00	<input checked="" type="checkbox"/> \$ 200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Collectibles Of Value - Guitar Brief description: Line from <i>Schedule A/B</i> : 8	\$500.00	<input checked="" type="checkbox"/> \$ 500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Sports & Hobby Equipment - Billiards Table and accessories Brief description: Line from <i>Schedule A/B</i> : 9	\$500.00	<input checked="" type="checkbox"/> \$ 500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Firearms - 1 Shotgun, 2 Rifles, 4 Handguns Brief description: Line from <i>Schedule A/B</i> : 10	\$1,200.00	<input checked="" type="checkbox"/> \$ 1,200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)

Debtor **Tery N. Tittle & Kimberly M. Tittle** Document Page 9 of 29 Case number (if known) **20-14377-AMC**

First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Clothing - Clothing			11 USC § 522(d)(3)
Brief description: Line from <i>Schedule A/B</i> : 11 Jewelry - Jewelry	\$ 25.00	<input checked="" type="checkbox"/> \$ 25.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from <i>Schedule A/B</i> : 12 Presence Bank (Tery) (Checking Account)	\$ 1,000.00	<input checked="" type="checkbox"/> \$ 1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(4)
Brief description: Line from <i>Schedule A/B</i> : 17.1 Presence Bank (Tery) (Checking Account)	\$ 3,600.00	<input checked="" type="checkbox"/> \$ 1,465.64 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522 (d)(5)
Brief description: Line from <i>Schedule A/B</i> : 17.1 PNC Bank (Kim) (Checking Account)	\$ 3,600.00	<input checked="" type="checkbox"/> \$ 2,136.46 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)
Brief description: Line from <i>Schedule A/B</i> : 17.4 Upper Chesapeake Health System - Vanguard 401k	\$ 512.54	<input checked="" type="checkbox"/> \$ 512.54 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)
Brief description: Line from <i>Schedule A/B</i> : 21 Co-Debtor was injured at work in February 2014. She has an outstanding workers compensation claim for unreimbursed medical expenses and travel expenses in addition to unpaid wages. She expects a lump sum payment of past benefits and reimbursements not	\$ 10,192.65	<input checked="" type="checkbox"/> \$ 10,192.65 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(12)
Brief description: Line from <i>Schedule A/B</i> : 30 Co-Debtor was injured at work in February 2014. She has an outstanding workers compensation claim for unreimbursed medical expenses and travel expenses in addition to unpaid wages. She expects a lump sum payment of past benefits and reimbursements not	\$ 0.00	<input checked="" type="checkbox"/> \$ 1.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(10)(c)
Brief description: Line from <i>Schedule A/B</i> : 30 already received. (owed to debtor)	\$ 0.00	<input checked="" type="checkbox"/> \$ 1.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(11)(e)
Brief description: Line from <i>Schedule A/B</i> : 31 State Farm Life Ins. (Policy on each Debtor)	\$ 0.00	<input checked="" type="checkbox"/> \$ 1.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)
Brief description: Line from <i>Schedule A/B</i> :	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from <i>Schedule A/B</i> :	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from <i>Schedule A/B</i> :	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

Fill in this information to identify your case:

Debtor 1 Tery N. Tittle
First Name Middle Name Last Name

Debtor 2 Kimberly M. Tittle
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number (if know) 20-14377-AMC

☒ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A
Amount of claim Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

Column C
Unsecured portion If any

2.1 Describe the property that secures the claim: \$ 117,229.60 \$ 440,000.00 \$ 0.00

21st Mortgage Corporation
Creditor's Name

PO Box 477

Number Street

Knoxville TN 37902

City State ZIP Code

Who owes the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this claim relates to a community debt

Date debt was incurred _____

324 Anvil Rd., Nottingham, PA 19362 - \$440,000.00

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☐ Other (including a right to offset) _____

Last 4 digits of account number _____

2.2

Describe the property that secures the claim: \$ 49,716.14 \$ 17,687.00 \$ 32,029.14

Ally Financial

Creditor's Name

PO Box 130424

Number Street

Roseville MN 55113-0004

City State ZIP Code

Who owes the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim relates to a community debt

Date debt was incurred _____

2016 Chev. Silverado - \$17,687.00

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Nature of lien. Check all that apply.

☒ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☐ Other (including a right to offset) _____

Last 4 digits of account number

2.3

Describe the property that secures the claim: \$ 27,655.79 \$ 10,734.00 \$ 16,921.79

Americredit Fin. Svcs d/b/a GM Financial

Creditor's Name

PO Box 183853

Number Street

Arlington TX 76096

City State ZIP Code

Who owes the debt? Check one.

☐ Debtor 1 only☒ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim relates to a community debt

Date debt was incurred _____

2015 Chev. Impala - \$10,734.00

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Nature of lien. Check all that apply.

☒ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☐ Other (including a right to offset) _____

Last 4 digits of account number

2.4

Describe the property that secures the claim: \$ 6,525.00 \$ 4,000.00 \$ 2,525.00

Mariner Finance

Creditor's Name

8211 Town Center Dr.

Number Street

Nottingham MD 21236

City State ZIP Code

Who owes the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim relates to a community debt

Date debt was incurred _____

2009 Yamaha Motorcycle - \$4,000.00 Also secured by 2002 Chev. Express. See Order on Obj. to Proof of Claim at Docket #42.

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Nature of lien. Check all that apply.

☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☐ Other (including a right to offset) _____

Last 4 digits of account number

2.5	<p>One Main Creditor's Name</p> <p>PO Box 3251 Number Street</p> <p>Evansville IN 47731-3251 City State ZIP Code</p> <p>Who owes the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred _____</p>	<p style="text-align: right;">Describe the property that secures the claim: \$ <u>10,250.95</u> \$ <u>6,590.00</u> \$ <u>3,660.95</u></p> <div style="border: 1px solid black; padding: 5px; min-height: 40px;">2006 Honda Goldwing - \$6,590.00</div> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p> <p>Last 4 digits of account number</p>
2.6	<p>Shellpoint Mortgage Servicing Creditor's Name</p> <p>PO Box 10826 Number Street</p> <p>Greenville SC 29603-0826 City State ZIP Code</p> <p>Who owes the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred _____</p>	<p style="text-align: right;">Describe the property that secures the claim: \$ <u>298,541.06</u> \$ <u>440,000.00</u> \$ <u>0.00</u></p> <div style="border: 1px solid black; padding: 5px; min-height: 40px;">324 Anvil Rd., Nottingham, PA 19362 - \$440,000.00</div> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p> <p>Last 4 digits of account number</p>
<p>Add the dollar value of your entries in Column A on this page. Write that number here: \$ 509,918.54</p>		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this information to identify your case:

Debtor 1 Tery N. Tittle
First Name Middle Name Last Name

Debtor 2 Kimberly M. Tittle
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number (if know) 20-14377-AMC

☒ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☐ No. Go to Part 2.
☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
<div>2.1</div> <div> <p>IRS Priority Creditor's Name</p> <p>Centralized Insolvency Operation Number Street PO Box 7346</p> <p>Philadelphia PA 19101-7346 City State ZIP Code</p> <p>Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> </div> <div> <p>Last 4 digits of account number</p> <p>When was the debt incurred? <u>2014-2019</u></p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify</p> </div>			

2.2

Keystone Collections Group

Priority Creditor's Name

PO Box 499

Number Street

Irwin PA 15642

City State ZIP Code

Who owes the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ **Check if this claim relates to a community debt****Is the claim subject to offset?**☒ No☐ Yes**Last 4 digits of account number**

\$ 272.98

\$ 272.98

\$ 0.00

When was the debt incurred? 2019**As of the date you file, the claim is:** Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Type of PRIORITY unsecured claim:**☐ Domestic support obligations☒ Taxes and certain other debts you owe the government☐ Claims for death or personal injury while you were intoxicated☐ Other. Specify**Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**☐ **No. You have nothing else to report in this part. Submit to the court with your other schedules.**☒ **Yes. Fill in all of the information below.**

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

4.1

Armstrong

Nonpriority Creditor's Name

437 Main St.

Number Street

Butler PA 16001

City State ZIP Code

Who owes the debt? Check one.☐ Debtor 1 only☒ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ **Check if this claim relates to a community debt****Is the claim subject to offset?**☒ No☐ Yes**Last 4 digits of account number** 3502

\$ 212.81

When was the debt incurred? _____**As of the date you file, the claim is:** Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Cable / Satellite Services

4.2

BLI Rentals, LLC

Nonpriority Creditor's Name

PO Box 992

Number Street

Emporia KS 66801

City State ZIP Code

Who owes the debt? Check one.☐ Debtor 1 only☒ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ **Check if this claim relates to a community debt****Is the claim subject to offset?**☒ No☐ Yes**Last 4 digits of account number** 4553

\$ 3,096.40

When was the debt incurred? _____**As of the date you file, the claim is:** Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Personal loan

4.3	BLI Rentals, LLC Nonpriority Creditor's Name PO Box 992 Number Street Emporia KS 66801 City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 5447 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Personal loan	\$ 787.02
4.4	Capital One Bank USA NA Nonpriority Creditor's Name PO Box 30281 Number Street Salt Lake City UT 84130-0281 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt	\$ 289.00
4.5	Capital One Bank USA NA Nonpriority Creditor's Name 1680 Capital One Drive Number Street McLean VA 22102 City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit card charge off	\$ Unknown

4.6	<p>Carmax Auto Finance Nonpriority Creditor's Name</p> <p>225 Chastain Meadows Court Number Street Kennesaw GA 30144 City State ZIP Code</p> <p>Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify 2009 Cadillac CTS/Surrendered</p>	\$ <u>14,662.00</u>
4.7	<p>Credit Collection Services Nonpriority Creditor's Name</p> <p>725 Canton St. Number Street Norwood MA 02062 City State ZIP Code</p> <p>Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify EZ Pass Violations</p>	\$ <u>53.95</u>
4.8	<p>Credit One Nonpriority Creditor's Name</p> <p>PO Box 98872 Number Street Las Vegas NV 89193-8872 City State ZIP Code</p> <p>Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt</p>	\$ <u>363.00</u>

4.9	DSNB Macy's Nonpriority Creditor's Name 701 E 60th St N Number Street Sioux Falls SD 57104 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt	\$ 400.00
4.10	Fingerhut/Webbank Nonpriority Creditor's Name 6250 Ridgewood Road Number Street Saint Cloud MN 56303 City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit card charge off	\$ Unknown
4.11	Lendmark Financial Services Nonpriority Creditor's Name 2118 Usher Street Number Street Suite 200 Conyers GA 30094-5173 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Personal loan	\$ 4,898.00

4.12	Mariner Finance Nonpriority Creditor's Name 8211 Town Center Drive Number Street Nottingham MD 21236 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify 2002 Chev. 1500 & 2009 Yamaha Star served as collateral and now disallowed - See Order at Docket #42	\$ <u>10,388.00</u>
4.13	New Credit America LLC Nonpriority Creditor's Name 811 SW Naito Parkway Number Street Suite 300 Portland OR 97204 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Personal loan	\$ <u>7,600.00</u>
4.14	NJ EZ Pass Nonpriority Creditor's Name PO Box 4971 Number Street Trenton NJ 08650 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify EZ Pass Tolls	\$ <u>53.95</u>

4.15	State of Delaware Nonpriority Creditor's Name Dept. of Transportation/EZ Pass Number Street PO Box 697 Dover DE 19903 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify EZ Pass Violations	\$ <u>91.50</u>
4.16	Syncb/Wal-Mart Nonpriority Creditor's Name PO Box 965024 Number Street Orlando FL 32896-5024 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt	\$ <u>127.00</u>

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. \$ <u>0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. \$ <u>70,671.64</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ <u>0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. \$ <u>0.00</u>
	6e. Total. Add lines 6a through 6d.	6e. <div style="border: 1px solid black; padding: 2px; display: inline-block;">\$ <u>70,671.64</u></div>

		Total claim
Total claims from Part 2	6f. Student loans	6f. \$ 0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ 0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ 0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. \$ 43,022.63
	6j. Total. Add lines 6f through 6i.	6j. \$ 43,022.63

Fill in this information to identify your case:

Debtor 1 Tery N. Tittle
First Name Middle Name Last Name

Debtor 2 Kimberly M. Tittle
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number 20-14377-AMC
 (if know)

☒ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	<u>Nathan and Anna Dunn</u> <small>Name</small> <u>158 Graves Road</u> <small>Street</small> <u>Oxford PA 19363</u> <small>City State ZIP Code</small>	Residential Lease Lessor

Fill in this information to identify your case:

Debtor 1 Tery N. Tittle
First Name Middle Name Last Name

Debtor 2 Kimberly M. Tittle
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania

Case number 20-14377-AMC
(If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

- ☐ Employed
- ☒ Not employed

Occupation

Employer's name

Employer's address

Number Street

City State ZIP Code

How long employed there?

Debtor 2 or non-filing spouse

- ☒ Employed
- ☐ Not employed

ER Tech

Univ. of Maryland

Upper Chesapeake Medical Ctr.

Number Street

City State ZIP Code

17 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ 0.00	\$ 4,456.29
3. Estimate and list monthly overtime pay.	3. + \$ 0.00	+ \$ 0.00
4. Calculate gross income. Add line 2 + line 3.	4. \$ 0.00	\$ 4,456.29

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here → 4.	\$ 0.00	\$ 4,456.29
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$ 375.35
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$ 0.00	\$ 1,529.34
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify: _____	5h. + \$ 0.00	+ \$ 0.00
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ 0.00	\$ 1,904.70
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 0.00	\$ 2,551.60
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ 0.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 2,500.00	\$ 0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00
8h. Other monthly income. Specify: _____	8h. + \$ 0.00	+ \$ 0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ 2,500.00	\$ 0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 2,500.00 +	\$ 2,551.60 = \$ 5,051.60
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____		
		11. + \$ 0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies		12. \$ 5,051.60 Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form? <input type="checkbox"/> No. Co-Debtor has received medical clearance to work 20 hours/week. It is a permanent restriction. <input checked="" type="checkbox"/> Yes. Explain:		

Fill in this information to identify your case:

Debtor 1 Tery N. Tittle
First Name Middle Name Last Name

Debtor 2 Kimberly M. Tittle
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Pennsylvania
(State)

Case number 20-14377-AMC
(If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☐ No. Go to line 2.
- ☒ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☒ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

☒ No

☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

☒ No

☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses

4. \$ 1,400.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 25.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 150.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

Debtor 1 Tery N. Tittle & Kimberly M. Tittle
First Name Middle Name Last Name

Case number (if known) 20-14377-AMC

		Your expenses
5.	Additional mortgage payments for your residence , such as home equity loans	5. \$ 0.00
6.	Utilities:	
6a.	Electricity, heat, natural gas	6a. \$ 150.00
6b.	Water, sewer, garbage collection	6b. \$ 75.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 220.00
6d.	Other. Specify: _____	6d. \$ 0.00
7.	Food and housekeeping supplies	7. \$ 250.00
8.	Childcare and children's education costs	8. \$ 0.00
9.	Clothing, laundry, and dry cleaning	9. \$ 50.00
10.	Personal care products and services	10. \$ 25.00
11.	Medical and dental expenses	11. \$ 0.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ 275.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$ 0.00
14.	Charitable contributions and religious donations	14. \$ 0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	15a. \$ 80.00
15b.	Health insurance	15b. \$ 0.00
15c.	Vehicle insurance	15c. \$ 100.00
15d.	Other insurance. Specify: _____	15d. \$ 0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <u>IRS Arrears/Anticipated Payment Plan</u>	16. \$ 500.00
17.	Installment or lease payments:	
17a.	Car payments for Vehicle 1	17a. \$ 864.68
17b.	Car payments for Vehicle 2	17b. \$ 0.00
17c.	Other. Specify: _____	17c. \$ 0.00
17d.	Other. Specify: _____	17d. \$ 0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$ 0.00
19.	Other payments you make to support others who do not live with you. Specify: _____	19. \$ 0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a.	Mortgages on other property	20a. \$ 0.00
20b.	Real estate taxes	20b. \$ 0.00
20c.	Property, homeowner's, or renter's insurance	20c. \$ 0.00
20d.	Maintenance, repair, and upkeep expenses	20d. \$ 0.00
20e.	Homeowner's association or condominium dues	20e. \$ 0.00

Debtor 1 Tery N. Tittle & Kimberly M. Tittle Case number (if known) 20-14377-AMC
 First Name Middle Name Last Name

21. **Other.** Specify: _____ 21. +\$ 0.00
 _____ +\$
 _____ +\$

22. **Calculate your monthly expenses.**
 22a. Add lines 4 through 21. 22a. \$ 4,164.68
 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a 22b. \$ 2,789.39
 and 22b. The result is your monthly expenses. 22c. \$ 6,954.07

23. **Calculate your monthly net income.**
 23a. Copy line 12 (*your combined monthly income*) from *Schedule I*. 23a. \$ 5,051.60
 23b. Copy your monthly expenses from line 22c above. 23b. -\$ 6,954.07
 23c. Subtract your monthly expenses from your monthly income. 23c. \$ -1,902.47
 The result is your *monthly net income*.

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

☒ Yes.

Explain here: Debtor's expenses are as anticipated following moving into his own residence at or prior to the sale of the residence. Vehicle expense assumes the ability to modify his current vehicle loan. Otherwise, he will have to obtain a different vehicle and payment.

Fill in this information to identify your case:

Debtor 1	Tery N. Tittle		
	First Name	Middle Name	Last Name
Debtor 2	Kimberly M. Tittle		
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		Eastern District of Pennsylvania	
		(State)	
Case number	20-14377-AMC		
(If known)			

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J-2

Schedule J-2: Expenses for Separate Household of Debtor 2

12/15

Use this form for Debtor 2's separate household expenses ONLY IF Debtor 1 and Debtor 2 maintain separate households. *If Debtor 1 and Debtor 2 have one or more dependents in common, list the dependents on both Schedule J and this form. Answer the questions on this form only with respect to expenses for Debtor 2 that are not reported on Schedule J.* Be as complete and accurate as possible. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Do you and Debtor 1 maintain separate households?

- ☐ No. Do not complete this form.
- ☒ Yes

2. Do you have dependents?

☒ No

☐ Yes. Fill out this information for each dependent.....

Do not list Debtor 1 but list all other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on Schedule J.

Do not state the dependents' names.

Dependent's relationship to Debtor 2:

Dependent's age

Does dependent live with you?

- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes

3. Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1?

☒ No

☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses

4. \$ 0.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 0.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

Debtor 1 Tery N. Tittle & Kimberly M. Tittle
 First Name Middle Name Last Name

Case number (if known) 20-14377-AMC

		Your expenses
5.	Additional mortgage payments for your residence , such as home equity loans	\$ 0.00
6.	Utilities:	
6a.	Electricity, heat, natural gas	\$ 150.00
6b.	Water, sewer, garbage collection	\$ 0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	\$ 276.00
6d.	Other. Specify: _____	\$ 0.00
7.	Food and housekeeping supplies	\$ 200.00
8.	Childcare and children's education costs	\$ 0.00
9.	Clothing, laundry, and dry cleaning	\$ 60.00
10.	Personal care products and services	\$ 75.00
11.	Medical and dental expenses	\$ 180.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	\$ 500.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	\$ 75.00
14.	Charitable contributions and religious donations	\$ 0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	\$ 80.00
15b.	Health insurance	\$ 0.00
15c.	Vehicle insurance	\$ 107.44
15d.	Other insurance. Specify: _____	\$ 0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <u>IRS Arrears/Anticipated Payment Plan</u>	\$ 500.00
17.	Installment or lease payments:	
17a.	Car payments for Vehicle 1	\$ 585.95
17b.	Car payments for Vehicle 2	\$ 0.00
17c.	Other. Specify: _____	\$ 0.00
17d.	Other. Specify: _____	\$ 0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	\$ 0.00
19.	Other payments you make to support others who do not live with you. Specify: _____	\$ 0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on <i>Schedule I: Your Income</i>.	
20a.	Mortgages on other property	\$ 0.00
20b.	Real estate taxes	\$ 0.00
20c.	Property, homeowner's, or renter's insurance	\$ 0.00
20d.	Maintenance, repair, and upkeep expenses	\$ 0.00
20e.	Homeowner's association or condominium dues	\$ 0.00

Debtor 1 Tery N. Tittle & Kimberly M. Tittle Case number (if known) 20-14377-AMC
 First Name Middle Name Last Name

21. **Other.** Specify: _____

21. +\$ 0.00

+\$

+\$

22. **Your monthly expenses.** Add lines 5 through 21.
 The result is the monthly expenses of Debtor 2. Copy the result to line 22b of
 Schedule J to calculate the total expenses for Debtor 1 and Debtor 2.

22. \$ 2,789.39

23. Line not used on this form.

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

☒ Yes.

Explain here: Co-Debtor is living outside of the residence. Co-Debtor's expenses assume the ability to resume vehicle contract payments at the current rate.